									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10/663 993				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			3					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X43=			OR	X86=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT						+145=			+290=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	" in column 2					OR		750
•							TOTA	\L .		OR	TOTAL	7781	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Col								SMA	LL E	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	ŀ	X43:				X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		ŀ				OR		
,								+145			OR	+290=	
							,	TO [*] ADDIT. F			OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)					 I 1		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X43:	=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	4.45				.000	
							1	+145			OR	+290= TOTAL	
								TOT ADDIT. F			OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=				X86=	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1		\dashv		OR		
<u>.</u> .					**O" := · · ·			+145		ا	OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
***	If the "Highest Nu The "Highest Num	mber Previously Pa aber Previously Pai	aid For" IN THI d For" (Total o	S SPACE I r Independ	is less tha ent) is the	n 3, enter "3." highest numbe				oropriate box	k in co	lumn 1.	